



Department  
of Agriculture  
STATE OF HAWAII

## Qualification for Reimbursement under the Livestock Feed Reimbursement Program FY 2008

Producers seeking assistance under Act 221 SLH 2007 may qualify for feed cost reimbursement assistance. Payment to eligible producers or handlers will be limited to the reimbursement of costs incurred during FY2008, up to a maximum of \$250,000, provided that funds are available.

This form will be used to initially qualify companies. Refer to [http://www.hawaii.gov/hdoa/add/add\\_md/LFRP/LFRP](http://www.hawaii.gov/hdoa/add/add_md/LFRP/LFRP) for program details and updates.

### General Information

Name/Title		
Farm or Business	dba	
Mailing Address	Farm or Business Address	
City, State, Zip	City, State, Zip	
Phone	Cellphone	Fax
Email		
Description of Business		
Program Qualification (check applicable selection) <input type="checkbox"/> milk herd, located in Hawaii, of not less than 350 cows <input type="checkbox"/> poultry flock, raised and located in Hawaii, of not less than 3,000 birds <input type="checkbox"/> pork herd, raised and located in Hawaii, of not less than 50 sows <input type="checkbox"/> beef operation, which grows, slaughters, processes, and markets in Hawaii, and finishes at least 100 head annually		

### Please attach copies of:

1. Completed Form W-9
2. Copy of a blank invoice w/Company Name & Address
3. Certificate of Good Standing (DCCA)
4. Original Tax Clearance Certificate (DOTAX)
5. Certificate of Compliance (DLIR)

I declare that this form has been examined by me and to the best of my knowledge and belief, is a true, correct, and complete representation, made in good faith, for the fiscal year stated.

Signature (required)

Date: \_\_\_\_\_

**NOTE:** Incomplete or incorrect information provided may lead to delays or denial of your application.

If necessary, when are you available for contact? ☐ morning ☐ afternoon ☐ evening

### For Office Use Only

Postmark/Date Received	Verified by _____ on _____	Mail completed form to: Hawaii Dept. of Agriculture Agricultural Development Division Market Development Branch Livestock Feed Reimbursement Program 1428 S. King Street Honolulu, HI 96814-2512 Phone: (808) 973-9595
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